SIDEWALK CAFE PERMIT APPLICATION

CITY OF LINCOLN, NEBRASKA LMC 14.50

EXHIBIT "A"

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Applicant Name: Hans Wanamaker Home Address: 1617 Nemaha St. 68502 Home Phone: 420-5310 Business Name: 475-0625 Grill walker Cookic Comp. Business Address: 138 N. 12 Street 68508 Business Phone: 475-0625	Please list days and hours of operation: Monday - Friday 11:30-2:00 p.m. Friday and Sat. 11:30 p.m - 1:30 a.m. Please describe how the sidewalk cafe will be supervised and maintained: The Grillwalk will supervise the area. When brillwalker is not there, the area will be totally clear. How many patrons will be served in cafe area?
Manager of Cafe Hans Wanamaker Address: 1617 Nemaha St 6850a Phone: 420-5310 Record Owner of Property Name: Wells Fargo Bank Address: 1248 "0" Street Phone: 434-4266 Does the record property owner agree to such use? X yes no Please attach a notarized letter of consent by record property owner for	Please describe any permitted advertising and street furniture used (photos may be attached): Tost the grillwalker. Please describe food and drink to be offered for sale: Served in a bread roll with ketchop or mustard. Please attach six copies of a plat or drawing indicating, to scale, the amount of surface public right of way you are seeking permission to use and the location of all furniture, equipment, and any other article occupying public space,

Please attach Certificate of Insurance (Applicant shall at all times maintain a policy of liability insurance from a company licensed to do business in the State of Nebraska with a minimum of combined single limit of \$500,000 aggregate for any one occurence. The insurance shall name the City of Lincoln as an additional insured.)

Permit Fees and Rent

An annual permit fee of \$100.00 must be paid to the City Clerk on the day of original permit approval.

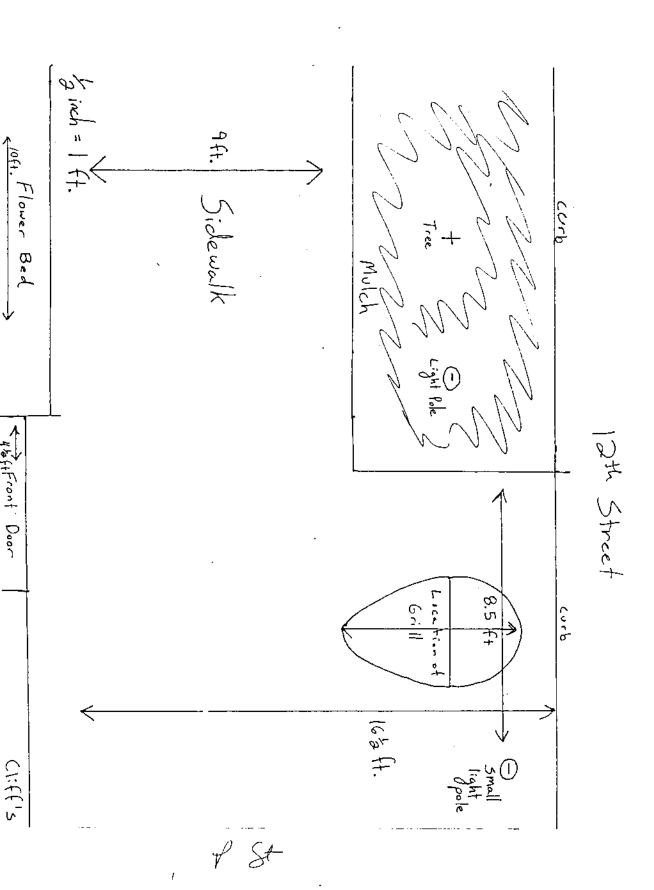
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original permit approval.				
☐ Paid ☐ Check #				
☐ Cash				
Annual rent of 25¢ (twenty five cents) per				
square foot of sidewalk space used must be				
paid to the City Clerk on the day of				
original permit approval.				
□ Paid □ Check #				
☐ Cash				

Hold Harmless

In consideration of being issued a permit for the use of surface space for a sidewalk cafe the undersigned applicant agrees to hold harmless the City of Lincoln and the officers and employees of the City for any loss or damage arising out of the use, or the discontinuance of any use. The undersigned agrees and understands that the use of the surface space is temporary, on a day to day basis; that the undersigned does not acquire any right, title, or interest in such space; that the undersigned may be required by the City at any time to vacate all or any part of the surface space that the undersigned has been given permission to use; that upon demand to vacate such space, the undersigned agrees to promptly remove any personal property placed thereon by the undersigned and to return the surface space to the same condition that it was in prior to commencement of such use or to reimburse the City for the cost of removing such property and restoring the surface space to its prior condition and that the undersigned has no recourse against either the City or its officers, employees or agents, either for any loss or damage occasioned by his or her being required to vacate all or any part of the surface space which the undersigned has been granted permission to use.

The undersigned further agrees at all times hereafter to comply with all municipal ordinances, rules and regulations of the City of Lincoln, Nebraska.

regulations of the City of Lincoln, Mediaska.
Dated this 1.0 1 day of Jan 1900a
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Applicant
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	CLi	ent#: 24449		C00	KI1			
	ERTIF	CATE OF LI	ABILITY IN	NSURAN	ICE	DATE (MM/DD/YY) 01/09/02		
INSPRO, Inc.			ONLY AN	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE				
1919 S 40th St, Suite #104			ALTER TH	HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
P.O. Box 6847								
Lincoln, NE 68506				INSURERS AFFORDING COVERAGE				
INSURED			INSURER A: No	INSURER A: Nationwide Insurance				
Hansen Werner,			INSURER 8:					
DBA The Cookie		У	INSURER C:		· · · · · · · · · · · · · · · · · · ·	<u></u>		
138 N. 12th St			: INSURER D:	: INSURER D:				
Lincoln, NE 6	8508		: INSURER E:					
COVERAGES		<u>-</u> -		 .	·			
ANY REQUIREMENT, TERM MAY PERTAIN, THE INSURA POLICIES, AGGREGATE LIM!	OR CONDITION NCE AFFORDE!	OW HAVE BEEN ISSUED TO T N OF ANY CONTRACT OR O D BY THE POLICIES DESCRIB HAVE BEEN REDUCED BY PAIL	THER DOCUMENT WITH ED HEREIN IS SUBJECT DICLAIMS.	RESPECT TO WHK T TO ALL THE TER	CH THIS CERTIFICATE M MS, EXCLUSIONS AND C	MAY BE ISSUED OR		
INSR LTR TYPE OF INSURAN		POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIN	AITS		
A GENERAL LIABILITY		P7230129173	09/20/01	09/20/02	EACH OCCURRENCE	\$1,000,000		
X COMMERCIAL GENERA	LLIABILITY				FIRE DAMAGE (Any one fi	re) \$300,000		
CLAIMS MADE	X occur		I		MED EXP (Any one person) :\$5,000		
					PERSONAL & ADVINJUR	y \$1,000,000		
<u>. </u>			·		GENERAL AGGREGATE	<u>•\$2,000,000</u>		
GEN'L AGGREGATE LIMIT AF	PLIESPER:		•		PRODUCTS-COMP/OP AC	sg \$2,000,000		
POLICY PRO- JECT	Loc	······································	<u> </u>		<u> </u>	<u>:</u>		
A AUTOMOBILE LIABILITY X ANY AUTO	'AC	P7230129173	09/20/01	09/20/02	COMBINED SINGLE LIMI (Ea accident)	s1,000,000		
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X HIRED AUTOS	İ					:		
X NON-OWNED AUTOS			i i	:	(Per accident)	\$		
	:		. <u> </u>		PROPERTY DAMAGE (Per accident)	s		
GARAGE LIABILITY					AUTO ONLY - EA ACCIDE	NT \$		
ANY AUTO	•				EAAC			

ACP7230129173 :09/20/01 09/20/02 EACH OCCURRENCE EXCESS LIABILITY \$1,000,000 X occur CLAIMS MADE \$1,000,000 AGGREGATE DEDUCTIBLE RETENTION WORKERS COMPENSATION AND EMPLOYERS LIABILITY ACP7230129173 09/20/01 09/20/02 \$100,000 E.L. EACH ACCIDENT EL DISEASE EAEMPLOYEE \$100,000

EAACC \$

E.L. DISEASE-POLICY LIMIT \$500,000

JLH @ ACORD CORPORATION 1988

AGG \$

OTHER THAN AUTO ONLY:

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS City of Lincoln is listed as Additional Insured.

CERTIFICATE HOLDER	ADDITIONAL INSURED: INSURER LETTER:	CANCELLATION
		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION
City of Lincoln		DATETHEREOF, THE ISSUING INSURER WILL ENGEAVOR TO MAIL 3.0 DAYS WRITTEN
Lincoln, NE 685	505	NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL
		IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, IT'S AGENTS OR
		REPRESENTATIVES.
		AUTHORIZED REPRESERVATIVE
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OTHER





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